

# STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <b>Clark County Courier</b>		2. DATE <b>9-30-11</b>
3. FREQUENCY OF ISSUE <b>Weekly</b>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <b>52</b>	3B. ANNUAL SUBSCRIPTION PRICE \$ <b>35, \$37, \$41</b>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <b>119 1st Ave. East, Clark, Clark County, S.D. 57225-1712</b>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <b>119 1st Ave. East, Clark, S. D. 57225-1712</b>		
6. FULL NAME OF PUBLISHER: <b>William J. Krikac</b>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">FULL NAME <b>Clark County Publishing, Inc.</b></div> <div style="text-align: center;">COMPLETE MAILING ADDRESS <b>119 1st Ave. East, Clark, S. D. 57225-1712</b></div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. <b>None</b>		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	2100	2100
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	315	312
2. Mail Subscription (Paid and or requested)	1692	1682
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	2007	1994
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	12	12
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	2019	2006
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	81	94
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	2100	2100

**Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public**  
**I swear that the statements made by me are true, correct, and complete:**

*William J. Krikac*  
 (Signature)

*Publisher*  
 (Title)

State of South Dakota                    )  
   §  
 County of \_\_\_\_\_ )

Sworn to before me this 30<sup>th</sup> day of September, 2011  
*Chante Helken*  
 Notary Public

My commission expires: 6-4-20013

(Seal)